		VT APPLICA	cave De	cember 8	2004	HON HEC	Ö	RD	10/	5	6	95	34.
			AS FIL	SFILED PARTI (Column 1) (Colu			- · · · · ·		EMM	Υ	OF	OTH	ER THÂN LENTIT
ı	TOTAL CLAS	ms 6						RATI	F	EΕ		RATE	FEE
	FOR	NUN	NUMBER FRED		NUMBER EXTRA		BASIC	EE 15	0.00	OF	BASICFI	300.0	
I	TOTAL CHAR	5 6	0 minus 20=		0	1	X\$ 25	=		OR	X\$50-	0	
	INDEPENDENT	3	3 minus 3 =		0) .		_			-	-	
I	MULTIPLE DE	PENDENT CLAIM	PRESENT	RESENT					+-		OA		0
	If the difference in column 1 is less than zero, enter "0" in column 2								-		OR	+360=	. 0
	1 /			_		COMMIN 2		TOTAL	· L		QR	TOTAL	#900
/	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMAL	LENTT	ry . (OR		R THAN . ENTITY
		CLAIMS REMAINING AFTER		HIGHE NUMB PREVIOU	ST ER JSLY	PRESENT EXTRA		RATE	ADI TION	-KC		RATE	ADDI TIONA
AMENDMENT	Total	• (O	Minus	PAID F	<u>OR</u>	.0	1	XS 25=	FE	\neg	ori	X\$50=	FEE
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	~			•				+180=	┼	┩`	PR	+350=/	1-7
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8		CLAIMS REMAINING	T	(Column HIGHES	1	(Column 3)	1		TADD		r	<u>:</u> _	ADDI-
AMENDMENT		AFTER AMENDMENT		PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	TION	al		RATE	TIONAL
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_	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST									- ,	_		• • •
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,H	the entry in cohe	Tin 1 is less then the	t entry in and	uma 2 webs ***	in one -			+180=		OR	L	360=	
-4	the "Highest Nur the "Highest Nur	mber Previously Pai mbor Previously Pai	id For IN TH id For IN TH	IS SPACE to less	then:	20, enter "20."		. TOTAL DOTT. FEE		OR	AUI	TOTAL DIT. FEE	
T	he Highest Num	ber Previously Paid	For (Total o	x Independent) i	s the h	ighest number	loun	d in the app	opriate b	ox in c	atum	n,1	•